

CITY OF URBANDALE

APPLICATION FOR BUILDING PERMIT

PROPERTY ADDRESS		DATE OF APPLICATION		DATE ISSUED		PERMIT NUMBER			
DESCRIPTION OF WORK				Site Plan-Show Existing and Proposed Buildings, Dimensions, Setbacks, and Easements.					
COMMERCIAL <input type="checkbox"/> ONE-FAMILY <input type="checkbox"/>		INDUSTRIAL <input type="checkbox"/> TWO-FAMILY <input type="checkbox"/>		PUBLIC <input type="checkbox"/> MULTI (NO. _____) <input type="checkbox"/>		N S E W			
LEGAL DESCRIPTION									
ZONING DISTRICT		VARIANCE OR SITE PLAN NO.							
OWNER	NAME		E-MAIL						
	ADDRESS		FAX #						
	CITY		CELL #						
	STATE	ZIP CODE	TEL. NO.						
CONTRACTOR	NAME		E-MAIL						
	ADDRESS		FAX #						
	CITY		CELL #						
	STATE	ZIP CODE	TEL. NO.						
ARCHITECTOR ENGINEER	NAME		E-MAIL						
	STATE LICENSE NUMBER		FAX #						
	ADDRESS		CELL #						
	CITY		TEL. NO.						
	STATE	ZIP CODE							
NOTE: Check water and sewer tap location. All manholes and stop boxes must be brought to finished grade. Electrical, plumbing, heating, air conditioning and boiler work shall be done under separate permits, which must be obtained before such work is started. Setbacks are measured to the nearest point over 30" above any grade, including cantilevers and decks, but not including eaves and chimney chases. Minimum floor elevations, where required, must be certified by a civil engineer before footings and before occupancy. Violations of the Municipal Code are punishable by \$500 fine or 30 days imprisonment, or both. Calling for inspections (278-3930) is the Permittee's responsibility. I hereby acknowledge that have read this application and state that the above is correct and agree to comply with all City ordinances and State laws regulating building construction.				OCCUPANCY GROUP		TYPE OF CONST.			
				VALUATION		BUILDING SQUARE FEET			
						LIVING AREA SQUARE FEET			
				PERMIT FEES					
				BUILDING PERMIT		\$ _____			
				PLAN REVIEW		\$ _____			
				SIDEWALK PERMIT		\$ _____			
				APPROACH PERMIT		\$ _____			
				SEWER CONNECTION		\$ _____			
				CERTIFICATE OF ZONING		\$ _____			
				OTHER		\$ _____			
				WATER		\$ _____			
				PENALTY		\$ _____			
				FINAL TOTAL		\$ _____			
				WHITE-CITY		CANARY-PERMITTEE		PINK-ASSESSOR'S	
TEMPORARY <input type="checkbox"/>		FINAL <input type="checkbox"/>		DATE					
WWW.URBANDALE.ORG REVISED: MAY 2006 NOTES:									